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| | MEMORANDUM FOR: | Chief, New Building Project Office, OL Chief, Personnel and Training Staff, OL Chief, Procurement Management Staff, OL Chief, Security Staff, OL Chief, Budget and Fiscal Branch, OL Chief, Facilities Management Division, OL Chief, Printing & Photography Division, OL Chief, Procurement Division, OL Chief, Real Estate & Construction Division, OL Chief, Supply Division, OL Chief, Logistics Operations Center, OL | |
|------------------------------|---|--|--|
| 25 X 1 | FROM: | Chief, Information Management Support Staff, OL | |
| | SUBJECT: | New Procedures for Facilitating OL Telephone Service Requests | |
| 25X1 25X1 25X1 25X1 | 1. OIT has established new procedures to more equitably manage the installation, relocation, and maintenance of secure and non-secure telephones. In response each directorate has appointed a focal point for reviewing and prioritizing its telephone requests. The focal point for DA is (EXA/DDA). 2. Each office within the DA also has appointed a focal point for telephone requirements. DAS/IMSS/OL, is the focal point for OL. Mr. will monitor and follow-up all OL telephone requirements 3. The OIT telephone request form (Form 3577), has been revised to permit review of information that should provide more timely accomplishment of telephone requirements. | | |
| 25X1 | ALL PARAGRAPHS | | |
| | | CONFIDENTIAL | |

SUBJECT: New Procedures for Facilitating OL Telephone Service Requests

will provide assistance in obtaining these new OIT forms. Mr.

currently has all outstanding telephone requests for
your component and will contact the officer designated on the old
forms to verify your requirement, establish the current priority,
and ensure required information is current and complete. He will
then resubmit them to the EXA/DDA for action. All future
requests will also be submitted through

EXA/DDA.

Attachment: New Form

25X1

25X1

25X1

Distribution:

Orig & 10 Addressees

- 1 OL Files
- 1 OL Reader
- 1 IMSS Official
- 1 IMSS Chrono

25X1 OL/IMSS/JS:dr (5Mar87)

NEW FORM

- 1. The following interim form should be used instead of the current "REQUEST FOR TELEPHONE SERVICES", Form 3577. This new form will be modified by OIT in response to your feedback.
- 2. Please fill out Section 1 entirely, except for "Project No.", which should be omitted. The Office designated telephone focal point should sign under "Requesting Officer". The Executive Assistant to the DDA will sign under "Approving Officer".
- 3. Please fill out Section 2 entirely, noting the <u>number</u> of telephones under the "Amount" columns.
- 4. To the left of "REQUEST FOR DATA/VOICE SERVICE" please indicate your requested priority number for this telephone action:

Priority 1 - IMMEDIATE NEED (7-10 days)

Priority 2 - RENOVATION (work will be scheduled in coordination with OL/FMD or OL/RECD renovation/construction work)

Priority 3 - ROUTINE (30-45 days)

5. Route the request as follows using Form 610 (pink routing sheet):

•

a. Originator of request.

25X1

25X1

b. Office telephone focal point.

c. EXA/DDA, 7D18 Headquarters

d. OIT/ESG/ID/ASB, 1B16 Headquarters

ADMINISTRATIVE - INTERNAL USE ONLY

plassify as appropriate

GUSTOMER REQ. NO. 19

| REQUEST FOR DATA VOICE SERVICE | | | | |
|--|--------------------------|--|--|--|
| ' SECTION 1: Requesting Office Information | | | | |
| Directorate/Office/Group/Div | Date of Request | | | |
| Requesting Officer | Phone Bl Gr | | | |
| Bldg/Room | | | | |
| Contact Name | Phone <u>Bl</u> Gr | | | |
| Project No. (OIT) Renovati | ion Yes/No | | | |
| Approving Official | Date | | | |
| Section 2: Vaice | Sanuina Paguagtad | | | |
| Non-Secure Section 2: Voice | Service Requested Secure | | | |
| Amount | Amount | | | |
| New | New | | | |
| Relocate | Relocate | | | |
| Database(Hq.Only)* | Database * | | | |
| Modify ** | Modify ** Disconnect | | | |
| Disconnect Other - Type | Other | | | |
| | | | | |
| * Ring Changes ** Telephone Number Changes | | | | |
| Location of Work - From: 31dg | Room | | | |
| Additional Information: | | | | |
| | | | | |
| Justification: | | | | |
| C.T.V. | | | | |
| | • | | | |
| | | | | |
| | DCL RVW | | | |
| classify as ap | | | | |
| Form 3577 - Replaces previous | | | | |
| Editions | | | | |